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# Harvard Medical Alumni Bulletin

Volume 4

October, 1923



# BACKGROUND

The use of cow's milk, water and carbohydrate mixtures represents the one system of

infant feeding that consistently, for over three decades, has received universal pediatric

recognition. No carbohydrate employed in this system of infant feeding enjoys so rich and enduring a background of authoritative clinical experience as Dextri-Maltose.



DEAN C. SIDNEY BURWELL, '19



### HAIL

A New Year and a New Class are upon us. The first year class was introduced to the School by the Dean in his by-now customary manner; a clinic on adhesive pericarditis. The situation was discussed to demonstrate the multiplicity of subject matters and techniques required in order that a doctor might be of benefit to the patient and in this manner a birds-eye view of what the next five or six years held in store was given each student. It would be a difficult task for most of us to so present a problem without drawing at all upon our medical vocabulary.

There are 126 new students including eight women. Perhaps the most interesting aspect of the new class is that it represents undergraduate education at 98 different colleges and universities. This large number is partly attributed to the vagaries of the last War and the fact that many attended two or more institutions of learning. Even so the spread is wide. 27 came from Harvard, 10 from Yale, 6 each from Princeton and Chicago, 5 from Columbia, 4 from California and interestingly enough 3 from Wellesley. Maine, Colorado, Utah, Minnesota and Washington supply three students each. No other college is represented by more than two students.

### AND FAREWELL

On Thursday, June 10, 1948, following Commencement exercises in Cambridge, the Class of 1948 together with wives, fathers and mothers gathered in the Quadrangle for the Valedictory Exercises.

This ceremony was held for only the second time in the history of the School, but from evidences of enthusiastic approval it will continue to be held for a long time to come.

Dean Burwell greeted the assemblage and introduced Dr. Edward D. Church-

ill who gave the Commencement Address. Following this the announcement of awards and prizes was made and the Dean gave the Valediction which will be found elsewhere in this issue.

The Valedictory Exercises began two years ago because a strong feeling existed among the students that a ceremony complementary to the Commencement Exercises at Cambridge was needed. To be bidden farewell in an environment (Cambridge) that perhaps only a few had ever visited, surrounded by several thousand complete strangers and addressed by men who were identifiable only by name, was impressive but hardly produced the emotional warmth usually associated with graduation that will inevitably result from familiar surroundings and friends.

### DEAN BURWELL

On the 16th of September President Conant announced the resignation of Dr. C. Sidney Burwell as Dean of the Faculty of Medicine. The resignation will take effect on February 1, 1949.

Dean Burwell has served as Dean since 1935. He will continue on the Faculty as Research Professor of Clinical Medicine devoting his time to teaching and research in the School and at the Peter Bent Brigham Hospital and he plans to resume his work on problems connected with heart disease.

Recognized as an outstanding clinical investigator when he became Dean, he devoted his energies to improve organization of the School for both research and teaching. During the past year he has given full time to administrative duties. In accepting the resignation on behalf of the Corporation, Mr. Conant noted that, "During Dr. Burwell's service as Dean, the Harvard Medical School has held its outstanding position in Medical education.

Its program of medical research has made major contributions to the nation's War effort as well as to peacetime medicine. In recent months, the medical faculty under his leadership has initiated a scheme of general reorganization embracing also the relation of the School with a number of allied hospitals."

### *MINOT TO CASTLE*

Dr. William B. Castle, Professor of Medicine, was named to succeed Dr. George R. Minot as Director of the Thorndike Memorial Laboratory of the Boston City Hospital. The appointment was announced jointly by Dr. C. Sidney Burwell, Dean of the Harvard Medical School and Dr. James W. Manary, Medical Director of the Boston City Hospital.

With Dr. Castle's appointment, Dr. Minot, Nobel Prize winner, medical research worker, doctor and teacher, retired from his joint positions as Professor of Medicine at the Harvard Medical School and Director of the Thorndike Memorial Laboratory.

Awarded the Nobel Prize in Medicine and Physiology in 1934 with Dr. William P. Murphy of Boston and Dr. George H. Whipple of Rochester, New York, for discoveries in the treatment of anemias, Dr. Minot has devoted over thirty years to medical research teaching. He has made important contributions to the subjects of



WILLIAM B. CASTLE, '21

anemia, abnormal bleeding and the treatment of leukemia by X-ray.

In collaboration with Dr. Murphy, Dr. Minot first successfully treated pernicious anemia by a diet containing liver, and with Professor E. J. Cohn of the Harvard Medical School, he later helped to develop extracts of liver which greatly simplified the treatment of this disease.

Dr. Castle, the new Director of the Thorndike Memorial Laboratory, has been associated with Dr. Minot in the Thorndike Memorial Laboratory for more than 20 years. He has been Associate Director of the Laboratory since 1932. He has also done important medical research on pernicious anemia, and in 1931 while serving as Director of the Rockefeller Foundation Commission for Study of Anemia in Puerto Rico, demonstrated for the first time the regular effectiveness of liver injections in the treatment of sprue, a serious variety of tropical anemia.

For his research efforts Dr. Castle has received Honorary Degrees from Yale University and from the University of Utrecht,



GEORGE R. MINOT, '12

Holland. He is also the recipient of the John Phillips Memorial Award of the American College of Physicians, the William Proctor, Jr. International Award for Distinguished Service in Promoting Health, and the Walter Reed Medal of the American Society of Tropical Medicine.

Opened by the Trustees of the Boston City Hospital in 1923, the Thorndike Memorial Laboratory was designed to provide adequate facilities for research and study to physicians engaged in the care of patients. At that time, this was a unique development in a municipal hospital, one which since has been copied successfully in other cities. Closely integrated with the clinical services of the Boston City Hospital and with the Harvard Medical School, the Laboratory has contributed directly to the better care of patients in the Boston City Hospital and has become an internationally known center of medical investigation.

During the quarter-century since its establishment, workers in the Thorndike Memorial Laboratory have added important knowledge to the treatment of blood disorders, including anemias, leukemia and hemophilia; infectious diseases, including pneumonia, and meningitis; and other maladies such as those involving the liver, kidney, thyroid gland and heart.

#### *SCHOLARS IN MEDICAL SCIENCE*

The John and Mary R. Markle Foundation which has in the past supported medical research by means of grants in aid, came to the conclusion in 1946-47 that a greater opportunity for the Foundation existed. Their present purpose is to improve medical research and education by assisting some of the promising young teachers and investigators who too often, for financial reasons, must forego academic careers to enter private practice or industrial laboratories. By steeling them against tempting positions outside their chosen field of academic medicine, by protecting them from being overloaded with any one type of

academic responsibility, by contributing funds toward their support, the Foundation hopes that within five years they can prove their ability and become permanently established as research workers and teachers.

Accredited schools nominate a candidate annually. For every scholar selected the Foundation sets aside \$25,000 to be used over a five year period towards his support or his research or both. The grant is paid to the cooperating medical school at the rate of \$5,000 annually, and in many cases is supplemented by the school from its own budget or from other sources.

There is a refreshing originality about this plan and a little thought convinces one of its assured success.

In 1948, 16 scholars were appointed at as many Medical Schools. Christian B. Anfinsen, Ph.D. Harvard University 1943, of the Department of Biochemistry is Harvard's representative.

#### *MR. RIDER*

On July 31, Mr. Elmer Rider retired from his post as Superintendent of the Medical School, Dental Infirmary and Public Health Buildings after 18 years of uninterrupted service.

A small ceremony was held and he was presented with various gifts from the faculty and members of the secretarial staffs.

Most of us who entered the School from time to time will remember and miss him.

#### *CLASS OF 1923*

In acknowledging the first of five annual checks of \$1,000 from the Class, Dr. Burwell wrote on October 7, 1948: "I am sure that the money will be helpful since scholarship funds are so urgently needed. I trust that the example of the Class of 1923 will be followed by others. It was a noble gesture for you and the rest of the Class so graciously to salute the School and the memory of your teachers."

# *A Medical Mission to Europe in the Spring of 1948\**

PAUL D. WHITE, '11

I have been asked to prepare a brief account of my recent visit to Europe. Part of the time spent abroad was in company with Dr. Chester Jones and he has joined me in that part of my account which concerns our medical mission to Greece and Italy.

This visit to Europe during the spring from March 20 to June 22 proved to be one of the most interesting and worthwhile experiences of my life. Having been invited, as the result of my participation in the medical mission of the Unitarian Service Committee to Czechoslovakia in 1946, to attend the 600th anniversary of Charles University in Prague, prior to the beginning of the work of the new Unitarian Service medical mission to Greece and Italy, my wife and I sailed from New York on March 20. We spent a few days in England arranging for further transportation and visiting several friends in London and nearby, especially the Parkinsons and the Lewises, whose daughters had been with us for part of the time during the second World War.

We went on to Paris by the Golden Arrow and there were in somewhat of a dilemma because of advice that it might be unwise to go on to Czechoslovakia because of the political difficulties. The Communist coup had occurred, as a matter of fact, a month earlier, and there was increasing evidence of restrictions in the country. However, we found on inquiry that the French professors of the Sorbonne, including the noted surgeon, Réné Leriche, had decided to attend the celebrations despite the withdrawal of the British universities and most of the American universities from participation. On the train from Paris to Prague we found four fellow Americans whose institutions did permit them to represent them. These in-

stitutions were Boston University, the University of Colorado, the State University of Washington, and the Moravian Institute of Bethlehem, Penna. They had elected, as we had also, to accompany the French professors. As a matter of fact, the chief address at the celebration in Prague, which followed the speech by President Benes, was given by a Frenchman, the Rector of the Sorbonne. The five days that we spent in Prague were full of interest and we enjoyed reunions with many friends made two years before. I was also privileged to address again the Czechoslovakian Medical Society, with the same doctors in the audience whom I had remembered addressing in 1946, and Alice Masaryk, Jan's sister, invited us to call on her at her home. I am sure that this visit to Prague was well worthwhile, especially in strengthening the friendly relations between the medical professions of Czechoslovakia and of the U. S. A.

From Prague, Mrs. White returned to America via Paris and London while I went on by plane to Rome on April 9 and thence to Athens on the 10th, four or five days ahead of the ten other physicians of the medical mission, who flew from New York to Athens and who included professors of preclinical and clinical fields in medicine and surgery from seven different universities on this side of the water—Columbia, New York, Pennsylvania, Chicago, McGill, Yale, and Harvard. The fields represented were physiology (Ralph Gerard of Chicago), pharmacology (Harry Van Dyke of Columbia), bacteriology (Alwin Pappenheimer of New York University), internal medicine (Chester M. Jones and Paul D. White of Harvard), pediatrics (Edward Pratt of Yale), general surgery (Edward Howes of Columbia), neurological surgery (Arthur Elvidge of McGill), anesthesia (Robert Dripps of Univ. of Pennsylvania), otolaryngology (Herman de Wilde of Har-

\*This paper, now slightly revised, was published in the M. G. H. News, September, 1948.

vard), and dentistry (Raedar Sognnaes of Harvard).

Our function, like that of the successful missions sent to Czechoslovakia in the summer of 1946 and to Austria in the summer of 1947, was to confer in detail with the members of the medical faculties in the universities in Greece and Italy. In order to do that, we visited the various departments of the medical schools, the hospitals connected therewith and other hospitals too, for example, military hospitals in Athens and Salonica. We conducted a course of lectures (with the help of native interpreters) in the university and hospital amphitheatres which were attended by the medical faculties, more advanced medical students, and practicing physicians, and we saw a certain number of patients, especially if they illustrated the fields in which we were individually interested. In some of these exercises the doctors of the native universities took part, for example, in panel discussions, and we also staged several clinico-pathological conferences, copied after our own here at M. G. H., but which were quite novel to the people in that part of the world. We spent nearly six weeks in Greece, most of which time we were at work in Athens, but for two weeks we visited Northern Greece. Our time there was devoted mostly to Salonica, where we carried on an active program for eleven days at the University, and for two days we visited three monasteries on Mt. Athos where we investigated the conditions of health among the monks, four of whom we took back for treatment with us to Salonica. Most of us made a trip to Corinth where we visited the hospital and the excavations of the American school. Two of the group also flew to Crete and spoke to the medical society there; one went to the Island of Thasos to investigate the dental conditions.

Everywhere there was great cordiality in the welcomes we received and enthusiasm in attendance at our lectures and conferences. We saw much of interest medically and on occasion found advanced work go-

ing on, particularly in certain surgical technics. The specialty of anesthesia, however, was a novelty, and we were, we think, helpful in presenting also some other of the newer advances that had been going on over here during the period of the last ten years when these countries had been more or less isolated by the war. The health conditions were improving rapidly, during the weeks we were there, coincident with the control of the disorders caused by the guerillas and bandits. There was very little serious malnutrition in the larger centers, but tuberculosis was a very important problem, being ten to twenty times as common as we know it here. Tuberculous meningitis was a common diagnosis in the hospitals, especially in the children's wards. Diphtheria, also, was fairly common and echinococcus disease was fairly rampant. On the other hand, malaria had been greatly controlled, to a twentieth of its incidence of a few years ago, due to regularly fortnightly spraying of all parts of Greece with DDT by a special fleet of airplanes. Also there was very little tetanus and exanthematic typhus. The usual diseases of the heart, lungs, gastrointestinal tract, and joints were much as we encounter them here, except for the high incidence of gastric ulcer during and since the war. Unusual anemias, on a nutritional basis or otherwise, were common.

Interesting incidents during our stay in Greece included visits to the American excavations at the Agora in Athens and at the ruins in Corinth, to the excellent American schools near Salonica, namely Anatolia College and the American Farm School, the celebration of Easter, which was marred by the assassination of the Minister of Justice, receptions by the university faculties, and audiences with the King and Queen. The American Mission for Aid to Greece (AMAG) was constantly helpful to us.

We flew from Athens to Rome on the night of May 19 to 20 and spent two and a half to three weeks in Italy visiting, in a manner similar to our program in Greece, the medical faculties of Rome,

Bologna, Milan, Florence, and Turin and also paid a brief visit to Naples and Capri, and to Sermione on Lake Garda. Throughout Italy we were received with great cordiality and were helped by Professor Morey, Cultural Attaché of the American Embassy. We enjoyed meeting the famous Bastianelli brothers, physician and surgeon, both well over eighty but very alert and active, and we also had a cordial audience with the Pope who showed considerable interest in the work of our mission. Our last official exercises were lectures in Florence on June 5 after which the mission broke up, most of the individual members returning to this country via Geneva, Strasbourg, Paris, and London. Several of us gave lectures in these cities en route home.

Thus, these three months in Europe in the spring of 1948 may, we hope, have helped a bit in restoring and even in establishing anew medical ties between

the old world and the new and in repaying in a small way some of the debts that we of the U.S.A. have incurred for generations past, when our forbears, and even some of us ourselves, went to Europe for advanced medical instruction and training. It was an especial privilege to express on appropriate occasions our appreciation of the beginnings of scientific medicine in Greece under Hippocrates and of the great medieval centers of medicine in Italy, especially at Bologna and Padua, and also our pleasure at finding still at these historic spots, able teachers and practitioners of medicine who are carrying on, even under great handicaps, a surprisingly high level of accomplishment in the medical sciences. The greatest difficulty which we encountered everywhere in Greece and in Italy was the extreme overcrowding of the universities with medical students; this will doubtless be corrected with time.

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## *The Harvard Hospital in England\**

DR. W. H. BRADLEY,  
*Ministry of Health, London*

I am going to talk about the development of the Harvard Hospital at Salisbury, England, since the end of the war. But before I do that I want to pay tribute to that grand group of people who were brought to England by Professor John E. Gordon nearly two years before the American nation entered the war against the Nazis. These were not a group of ordinary people. They had the courage to face an Atlantic crossing and whatever might come to an England awaiting an invasion, and six of them lost their lives on the way across. The remainder brought a new outlook and a new knowledge which finds permanent expression in the interesting institution about which I am going to talk.

The American Red Cross-Harvard Field Hospital Unit included 120 patient beds especially equipped for the care of communicable disease, and also lavish provision of laboratories especially equipped for the study of epidemiology and the spread of communicable disease. The Chief Medical Officer of the Ministry of Health in England, Sir Wilson Jameson, in his report on the state of the public health during six years of war, gave an account of the valuable contributions which the Harvard Field Hospital made to the health of Great Britain in the two years preceding the entry of America into the war.

When hundreds of thousands of troops invaded England, they required a great deal more hospital and laboratory accommodation than could easily be provided out of our limited resources, and the Har-

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\*Presented at the School of Public Health  
July 20, 1948.

vard Hospital had to be appropriated to serve the American Army. It provided excellent accommodation for the First Medical General Laboratory in the European Theater of Operations and during the period of the American Army's stay in England the hospital remained a center of American microbiology and epidemiology in that theater and a scientific institution of great importance.

Right from the inception of the hospital the intention of Harvard and the American Red Cross had been to give the hospital to the Ministry of Health in England and when the Army evacuated the hospital, the Ministry of Health found itself possessed of a center which provided all the facilities for simultaneous study of the clinical and epidemiological aspects of disease. There was at first considerable discussion as to how the hospital could best be used, but about this time Dr. Christopher Andrewes of the National Institute of Medical Research in London proposed that the time had come to apply recent advances in the study of virus diseases to the study of the common cold.

You will all realize that the common cold is a major problem. Somebody—I can't remember who—has calculated that on an average each one of us catches about two and a half colds a year and economically the cold is probably one of our most expected and serious problems. The medical profession, and particularly the public health workers, are very confident of its importance and a very great deal of effort has been devoted to learning more about the common cold.

I think it is fair to say that the very best workers in the world have had a crack at it in their time, but it is a difficult nut to crack, and until recently the tool with which to do the cracking has not been available. One of the great difficulties has always been that, apart from chimpanzees, man is the only animal susceptible to the common cold. The chimpanzee is a very difficult beast to handle experimentally. By comparison, the human volunteer is much more

satisfactory for the purpose, but even so, right at the beginning of an investigation of the common cold is the problem first of catching your volunteer and then of housing him under experimental conditions.

The hospital at Salisbury provided excellent facilities for housing volunteers under conditions of almost absolute isolation, and careful observation has shown that cross-infection does not occur under the experimental conditions which have been arranged. You have to have a lot of volunteers to study even a very small aspect of the problem of the common cold and you cannot afford to be as extravagant with them as you could with eggs, guinea pigs, or other experimental animals. A great deal of thought had therefore to go in to the design of the experiments, and it was decided that the first thing to do was to see whether one could take the problem of the common cold into the laboratory. Therefore, the humans were used merely as detectors of the presence of an agent capable of producing the common cold, while at the same time the virologist attempted to observe phenomena in the laboratory which also gave evidence of the presence of the cause of the common cold.

It has been known for many years that nasal discharges of persons with colds, poured into the noses of healthy persons, will cause the latter to catch cold. What we want to do is to learn something more about the physical qualities of the agent present in the washings from a cold, and see how the agent is modified by various treatments. You might think it would be no easier to catch humans for this purpose than to catch chimpanzees, but that isn't the case.

In England there are large number of public spirited people ready to submit to the experiment. Students at the Universities provide us with an abundance of such material during the vacations, but during term time industries and the public at large fill our needs, and this in spite of the fact that we are particularly choosy about our volunteers. They must be absolutely

healthy young people, between the ages of 18 and 40. They must not have had a cold during the previous three months, and they have to go through a good medical examination when they arrive and are thrown out unless we think they are perfectly fit. They must also be of sufficient intelligence to be able to keep a fair record of their sensations during the trial and we are very careful also to exclude the quacks who come down in order to teach us how to treat and prevent the common cold. There are quite a lot of these about.

We must have had at least 1500 people through the trials already and of these I should think about 500 had been given colds. You see, it's like this. One must control all these investigations very carefully and not more than half the persons arriving are given material calculated to give them colds. The doctors and scientists on the spot never know whether the material given to a volunteer contains or does not contain a virus or other agents which cause colds. This knowledge is available only to the scientists at the National Institute of Medical Research at Hampstead in London.

Perhaps our success in getting volunteers depends largely upon the very attractive accommodation we are able to offer them. They seem to like the American furnishings in the hospital and the simple but very effective structure of the buildings. They also love the beautiful country around the hospital at Salisbury and a considerable proportion of them press to be allowed to come back a second time, but we will not have them back until six months have elapsed since the last cold we have induced in them. You will be amused to hear that quite a proportion of the people who come for the trials are newly weds on their honeymoon. They seem to think the conditions and rules very appropriate because with the exception of a doctor and the head nurse, nobody is allowed to come within thirty feet of them during their fortnight's stay at the hospital.

The Government pays the railway fare

of any volunteer from any place in Great Britain. We are able to supplement the ordinary ration a little and this makes a fortnight at the Harvard Hospital particularly attractive. Also there is a little free beer on the menu and a free telephone, and in addition a little less than a dollar a day for pocket money, but this can not be spent during the trial, because quite obviously volunteers are not allowed to enter shops or places of amusement. Really a visit to the Harvard Hospital at present is an excellent rest cure spoiled by a bad cold if you are a little unlucky. This is a chance which can be safely taken because up to the present we have had no accidents whatever; nobody has been seriously ill as the result of these experiments.

I know of four groups in America working along similar lines to those we are following in England in this investigation in colds. I have been able to visit two of these groups and from what they tell me it is obvious that our facilities in England, are rather better than those at Washington and New York. I am rather amused by the thought that it is as the result of the generosity of the people of Harvard that we in England have been able to get a little ahead of our colleagues in America. So far we have not made many discoveries of great public interest. This doesn't mean that we have learned nothing. We have in fact made some progress which for the present is mainly of academic importance. This work will appear in due course as a scientific paper, but it is really no more than a drop in the ocean. There is a very great deal of work to be done and little possibility of a dramatic discovery concerning radical measures for prevention and cure, and I fear that for the time being at least the human will have to be the experimental animal. But when there is as good collaboration between the volunteer and experimenter as we have had at the Harvard Hospital in Salisbury, such work is so much fun for the volunteer and I hope the American groups will have as much success in getting volunteers as we have had in England.

# *A Letter to a Classmate Concerning the Twenty-Fifth Reunion*

Portland, Oregon  
August 21, 1948

My Dear John;

I am more than pleased to be asked to give you my impressions of the recent reunion of our medical school class. It is a pleasure to reminisce, even to philosophize a bit, in relation to this truly momentous occasion—a twenty-five year reunion of eighty-seven members of an original class of one hundred and ten with six interim deaths. That in itself is striking—one wonders why it is and how it came about.

College class reunions in general, you and I will agree, are hot stuff for perennial sophomorism, and the escapist carries most of the impetus for these otherwise rather footless affairs. The graduate school, however, and particularly a medical school, nurtures a different breed of cats. We were an especially hard-bitten crew and we certainly had shaken off our collegiate sentimentalities in the first World War—i.e., the forgotten—each one of us had been in, in one way or another. We were the first postwar class from that war which was conspicuously without postwar graces and plaisances for the returning veteran. We had had a lot of our shine worn off and the fact that a gracious last minute decree of the administration let in sixty extras certainly didn't make it any easier for most of us. I myself had moments of regretting that I had been saved by this largesse from the bitter necessity of attending Yale or Columbia. You recall, of course, that our class was graduated at the routine figure sine the extra sixty.

I think it is clear to all of us that there is a stronger motivation in the graduate school reunion, and more specifically in our special case; we are bound together by bonds of tougher fiber; scholastic hardships withstood; vistas of intellect deeply explored; lusty relaxations well earned; the true comradeship of potent experience in fine pursuits—these are a

few of the liens which give us solidarity.

For myself I got a tremendous boot out of almost everything I heard during those two days. In retrospect I can recall a dozen conversations. Conducted intellectual tours through the new medical school departments were enlightening—fascinating for comparison with our own experience at Harvard and our experiences in present day teaching. For the enlightened intelligence, here was a heartening demonstration of the potential for progress of good minds working under the spell of a clear idealism.

On the other hand, certainly a most potent factor in our enjoyment and profit involved the opportunity to observe the change and progress of our classmates as individuals. Gad! What a fascinating business! Who, for example, would have, in 1925, spotted big, bluff Eddie Bortz as the now eminent literary intelligence, the composer, the ultimate esthete? Do you remember W. O. Thompson in his freshman year? Would you have picked him for the pre-eminence he has so justly gained? Remember Glen Spurling—modest, unobtrusive, unassuming—who in the world would have picked Glen to be one of the great brain surgeons of all time? Shields Warren, of course, I think we might all have spotted for his self-contained, efficient conduct and a certain quality of spiritual accretiveness. Shields was always a copious fellow. Look at Bob Stecher—aside from the definite assurance of his clinical success, who would have predicted that he would become an outstanding medical historian and bibliophile? We might perhaps have slated Wyman Richardson for a post as a regular contributor to the Atlantic Monthly; or Paul Spangler as a candidate for an admiral; but I'll lay you a wager that none of us would have bracketed LeMoine Snyder as doubtless the greatest medicolegal criminologist. In such a group of names, signalized for high distinction in research and clinical accom-



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plishment, you could pick dozens: Bill Dameshek; Louis Hurxthal; Toussaint Tilden—only to start. This is a handful, a small handful of the majority of our boys who have made good in the big brackets. And if you are talking about distinction, how about a hand for Paul Duff as the father of eleven splendid youngsters? Of course, it is my own deeper impression that these quite obvious virtues represent actually the majority impact. I went away from Boston this time carrying the healthiest and most comforting feeling. A truly heartening conviction of the rightness of our profession if the conduct and motives of this group could be judged representative.

A good commentary and a matter of note—there wasn't much of any visible sentimentality—even at Jim White's splendid Tavern Brawl. There was sound sentiment, I thought, and an almost sentient appreciation of the traditional values of the old Harvard-Boston setting. You, with your Irish, John, are enough the sentimentalists not to deny me a minor thrill—sauntering into the old anatomy lecture hall; glancing around at odd chance, with the sudden realization—Herb Wright sitting in exactly the same front seat he had elected, twenty-eight years ago; little Red Armstrong with his overcoat and cockeyed hat at the same rakish 1923 angle; Arthur Wright smack up front and looking as eager as ever; a queer nostalgic observation—everyone automatically strayed back into his old place.

There wasn't any of the conventional tripe which apparently can't be ironed out of ordinary class reunions. The necessary evils of medical meetings in general were also conspicuous by their absence. You will recall that not one of us inflated his scholastic ego by retailing his scientific accomplishments. There was shop talk, to be sure, but not in general meeting. With so much really to boast about, it seemed to me the healthiest possible sign that Bortz in his allotted fifteen minutes gave us the A.M.A. philosophical gossip; Glen

Spurling spun the fascinating yarn of General Patton's demise; LeMoine Snyder unravelled the under-cover details of the Overell murder. Another healthy sign—necessary business was expedited. If history was made in the presentation of a substantial check to the Medical School; if a fine innovation took the form of the creation of a handsome scholarship fund, no time and forensic wind were wasted. Dean Burwell and even Reg Fitz caught the sense of necessity to get through with these workaday matters in favor of the fine informalities.

Jim White's Tavern party was, of course, a vital component—way out and ahead of the cocktail party, which, however, carried its own graces. When in your life, John, have you ever sat through a three hour seance comparable to that evening? Feast of spirit and flow of soul; never a maudlin phrase! Even our abstemious members were entranced. My own thought is that the tenor of that occasion was set by such key people as Bob Goodale, Frank Balch and your own genial self. Fine things were given free rein to take their course. The finest—the most total truth about the guts of that crowd grew out of the absolute informality of those proceedings. The virtue was utterly spontaneous; absolutely integral.

It is my own perhaps by now sentimental conclusion that the caliber of our group was predetermined. That so many of our members should have led distinguished lives was hardly to be questioned from our second year forward. That there should be a constant—even an increasing solidarity in our group is not strange. Other reunions of the classes of Harvard Medical School have been distinguished—others will be distinguished—but certainly a fine precedent has been set, and without conscious effort. All praise to the local committee, but they will be the first to claim the broader intrinsic nature of the success of our meeting.

# *A Proposal The West Thistleton Plan for Alumni Reunions*

My class had its twenty-fifth reunion this year and we reined quite some. I got back home to West Thistleton intact, although I wouldn't venture to say unsullied, and the only dum reason Hattie let me into the house after all the capers I'd been cutting was that she'd been along with me and cut as many as I did, pretty nigh.

The class had a couple of other reunions before, a tenth and a fifteenth if I don't disremember, but the boys didn't rightly turn out 'til this twenty-fifth. Then they came. Joshua, how they came! Everyone who could walk and one on crutches and by the last day he was the only one walking straight. They came from all over: down South—New Orleans and New York, out West—Utah, Albany, Oregon, and even a Democrat from Vermont.

The boys had mellered up considerable in twenty-five years. Twenty-five years ago they used to be hot shots and now they were big shots. They'd stayed just as hot, only now the hot was warming, not burning. Everyone allowed as this was the ripsnortinest medical meeting he ever was to and every last feller wanted to know why we hadn't done something like this afore and they swore by thunderation they'd do it again for the thirtieth. So when I got back to West Thistleton I told my littlest boy Peter what they said and Peter said "Nuts, Pop" and Peter's only twelve but I'm almost afeared he's got the right of it. A class will meet once at the twenty-fifth but not really meet afore and not after 'til Gabriel ups and toots. What's so dadgummed sacred about twenty-five? Why not five and ten and fifteen and twenty and thirty and so on so long as we keep a-kicking? I snum, but there's more git-up-and-git in the alumni of the civil war than the medical school, seems as if. The G.A.R.'s war

wasn't much tougher, either.

You should have seen the highbrows around that reunion of '23. There was an atom cracker and a Georgia cracker, an Atlantic author, a couple or three deans, eight-ten honest researchers, even an editor or so and as for professors—why, we were pulling them out of gutters like Yale men. Take it all and all, we had a good few who could figure which way the wind blew if only it blew even moderate hard. Now, fellers like that, they've got something to say. And they like to say it. Will you tell me where else they could hitch their britches, slip their gallusses and spit it out like they could at this meeting, where everything was right in the family? They didn't need to hedge around with "43. 6% were positive, 6.47% doubtfully positive," some other percentage yes-or-no-maybe and the rest nothing anyway. No, Sir, they could come right out and say "Listen, boys, here's how 'tis:—"

As for the rest of us, that's how we want to learn. We want the low-down and we'd like it from some one we know how far we can believe, like a schoolmate. You take the ordinary medical meeting and you hear Snicklepuss dilating on something he thinks he knows that you and I find out for ourselves, two-three years later, is breeching polish. Else you hear something Jones proved years ago but Smith disagreed with so he waited for Green to confirm. Yes sirree, Sir, when one of our own boys knows the rights about something that puzzles you and me, and some one of them's pretty liable to, then we're beholden to him if he says so. And we won't fret our minds if Dr. Persimmon and Associates Professor Splitahaire keep awhiffling around about it right up through 1961. Yes, Sir, there's a site of satisfaction in a medical meeting, family-style. And your corres-

ponent would admire to know when he'll get another chance to sashay up to the president of the A.M.A. and say "Hey, Eddie, your shirt-tail's out."

Well, what I'm edging around to is that reunions can be pretty mighty profitable to more than gullets and the Haymarket Police Court. These days, it takes considerable circumnambulating around and a powerful site of gall to come out a projecting another—Jeerusalism, another!—medical meeting. But that's just what you're being propositioned with right here and now: a real meeting of the whole alumni, with class reunions inside of it, coming around once every five years.

One of them upstart Western schools, that one in Ann Harbor if I don't misremember, runs a jamboree like that every three years and I hear tell it's a caution. Some hospitals have 'em, too: the way folks flock back to the Brigham every five years you'd think it was a husking bee with yellow ears barred. Maybe for our reunion we might have, say, a Thursday—Friday—Saturday meeting with Saturday afternoon for golf or seeing a game—maybe a football game if we had it in the Fall—and Sunday for aspirin and travelling. The days could be for meetings, either

general or by specialties, and the luncheons and evenings for skyshooting and lie-swapping. One advantage to that sort of meeting, you'd see old friends who weren't in your own class. Back in '23, we didn't much know fellers outside our own class, but the whippersnappers who lived in the dormitory, with all classes mixed together and sometimes one from Simmons, they would, it seems as though.

I can see you'll ask right off, how can reunions come around on time for all classes if we only have them in, say, 1950, '55, '60 and so on? Well, why do they need to come on time? If '23, '24, '26 and '27 want to pretend that 1950 is their twenty-fifth year, along with the legitimate '25ers, why speaking for '23, I'd almost venture to suspicion that the idea of an extra twenty-fifth reunion would hearten the boys so thoroughly they wouldn't mind making as many illegitimate in the class as '24 has already. And why do things have to be forever regular and on time anyway? That's man-scientific, not nature-scientific. Yes, Sir, it's when she stops being precise and regular that nature gives us the best things in life. Like that Peter of mine.

"JOHN HUMPHREYS," '23

## Reunions

### FIFTIETH REUNION

The Class of 1898 enjoyed a delicious dinner and a very pleasant evening at the Harvard Club on June 11, 1948. The following were present: William J. Collins, William E. Currier, Lincoln Davis, Arthur K. Drake, Ernest B. Emerson, Eugene E. Everett, Thomas M. Gallagher, Joseph Hart, Myron L. King, Edward H. Mackay, Luther G. Paul, Joseph W. Proctor, Lucretius H. Ross, Edward K. Sawyer, David H. Walker, Michael W. White. The President, Lincoln Davis, presided, and after some appropriate remarks, several communications were read from absent members.

The Class of 1898 was a famous class

for many reasons, but particularly for the reason that it received the highest percentage of degrees "cum laude" of any previous class. In fact, the Faculty was so perturbed that a vote was passed to increase the average percent necessary to secure a "cum laude"!

The President asked that each member give a short account of his life and achievements. Everyone responded, and it was exceedingly interesting and comforting to realize how successful each and every one had been, and the important positions they held in their respective communities.

I mention especially the story of the travels of Bill Collins, who, as he remarked, was born with an intense "wander-

lust"! He has travelled the "seven seas" and as many lands besides. His description of the Leper settlements in the South Sea Islands was interesting, and the account of the methods of modern treatment valuable. He is now enroute to Patagonia!

Tom Gallagher, medical examiner for Middlesex County, gave a detailed account of the great advances made in the teaching of Legal Medicine in the Medical School, under the charge of Professor Moritz. He spoke of the great impetus to that science given by the late George Burgess Magrath, who was a member of the class. George Magrath was spectacular in many ways,—a talented musician, a great scholar, and a clever investigator of crime.

An enjoyable evening too soon came to a close.

D. HAROLD WALKER

#### FORTY-SEVENTH REUNION

The Class of 1901 met at a dinner at the Harvard Club, Boston on June 11. In the absence of the President, David Cheever, Nathaniel K. Wood, presided. Fourteen members were present.

#### FORTIETH REUNION

Eighteen members of the class attended a part or all of the reunion which began Friday morning, June 11. At a meeting in the Faculty Room of the Medical School Dean Burwell gave a talk on the changes which had taken place in the School in the last 40 years with particular reference to the vast increase in the budget, in the cost of education per man and in the size of the teaching staff. Dr. Lewis Dexter described the research which has been carried out on catheterization of the veins, and Dr. Joseph Aub spoke on cancer research. The members and a number of wives then lunched at the Oakley Country Club, after which 15 men motored to the Snow Inn at Harwichport where they stayed until Sunday afternoon. The class dinner was held on Saturday evening and was followed by a brief report from each member.

In spite of the rainy weather, it was the general opinion that the gathering of men who had been so long separated was a great experience. Three men—Quigley, Hiltner and Hall—had come all the way from the west coast, but they said the meeting was worth the effort.

We were all impressed by the development of character in these classmates of ours; there had been a ripening, a mellowing, in their attitude towards life. The stress of two wars and the discipline of forty years in medicine could have had no other effect.

GEORGE GILBERT SMITH

#### THIRTY-FIFTH REUNION

Eighteen members of the class had a reunion dinner at the Harvard Club on June 5.

#### THIRTIETH REUNION

Out of 77 living members of the Class of 1918, 27 attended the 30th Reunion Dinner at the Harvard Club on June 12th. There was, of course, a good representation from New England. Four men turned up from New York State, one from Pennsylvania, one from Nebraska, one from Virginia, and one from Nova Scotia. Those attending were Angevine, Atwater, Colby, Daland, Edgelow, Fremont-Smith, Harris, Henderson, Howe, Howes, King, Lincoln, Lord, McIntosh, O'Meara, Osgood, Parkhurst, Ronne, Root, Rose, Smith, Steenburg, Stone, Taylor, Waring, Winsor, Bullard.

#### TWENTIETH REUNION

Thirty-five members of the Class of 1928 met at the Harvard Club on June 5 for a reunion dinner.

#### FIFTEENTH REUNION

The Class of 1933 held its 15th reunion at the Harvard Club of Boston on June 5. Twenty members were present and a pleasant informal evening was had. No business was conducted but the "ubiquitous, omnipresent, prolix, peripatetic of '33" was unanimously voted to Ralph Hawkins.

## TENTH REUNION

The 10th Reunion of the Class of 1938 was held at the Harvard Club on June 5th. Thirty-seven members of the class attended, most of them from in and around Boston. Several did manage to come from a distance,—Bill Bolger from Philadelphia, Al Yankauer, Con Riley and Barney Glueck from New York City, L. Strobino and Dave Johnson from upper New York State, J. Folley from Dartmouth and Burness Moore from Yale. During the cocktail hour acquaintances were renewed and the comments were universal that the other guy didn't look much older. The only really noticeable change was in the hair lines; several had receded quite markedly.

Ossie Carey acted as toastmaster during the dinner and informal program. Irad Hardy was introduced as the newly elected Permanent Class Secretary. Irad takes Bob Hurlbut's place. Bob was keenly missed and the entire class deeply regrets his loss during the Pacific war.

The serious business of the evening re-

lated to a discussion of the Class of 1938 H.M.S. Fund to be presented to the University on our 25th Reunion. This contribution will be made to the unrestricted funds of the Corporation at that time. Those present expressed the belief that contributions should start now so that during the ensuing fifteen years a fund of which we can be proud will have accumulated. A committee will be appointed to investigate contributions and a report will be sent to the members.

The toastmaster introduced several of the class who expressed themselves concerning various aspects of their professional and personal life. From those present and from the notes on the class, information was available on almost everyone. Several classmates have achieved the assistant and associate professorial rank and most are active in private practice.

The evening ended as it should with Bob Lorimer at the piano, with everyone happy to have attended and proud of the Class of 1938.

F.M.I.

## *Graduation Exercises*

June 10, 1948

C. SIDNEY BURWELL, M.D., '19

It is a great pleasure to welcome you here this afternoon. First, as the representative of the Faculty of Medicine, I bring the greetings of the Faculty to all here assembled, to those Doctors of Medicine and of Dental Medicine on whom degrees were conferred this morning by President Conant, and to their friends who have come to celebrate this milestone in the lives of these young men. Second, as a representative of the profession of medicine, I welcome these new doctors to the profession. Work in the fields of medicine and dentistry is difficult and exacting; and partly because of this, it offers the possibility of satisfaction and achievement. Up to now you have been candidates for the degree of Doctor of Medicine or Doctor of Dental Medicine. I welcome you now

as candidates for the satisfactions of accomplishment in these fields.

It is my privilege to say a word of farewell to our new colleagues. What I have to say is addressed to these new members of our joint profession. You are here because you sought entrance to medicine and because you were selected from a large number of competitors as individuals of promise. The main factors in that judgment of your promise were your ability and your character.

In the Medical School and in the School of Dental Medicine you have had the opportunity of building a foundation on which your future career is to be founded. It is only a foundation, however, and it will not be a functioning structure unless you, as of today, take over the responsibili-

ty of planning that lifelong educational process which is the price of accomplishment in medicine. Your colleagues on the Faculty and your seniors in the hospital will have an interest in your future education, but the *responsibility* for planning it and for giving yourself an opportunity to develop into the kind of an individual you want to be is quite specifically your own job. And it would be a bad day for medicine, in my opinion, if that responsibility were assumed by a formal educational organization which would take away from the individual the power and responsibility of molding his own future.

My first point, then, is this emphasis on your own responsibility for the rest of your medical education.

My second point is to remind you as you leave here hopeful of success that there cannot be the possibility of success unless there is also the possibility of failure, and because I want so much to have you be successful in the true sense of the word I propose to say one or two words about the factors in the failure of medical men to realize their promise.

First, it would be a foolish man who would deny the possible influence of catastrophe or bonanza. Luck may play a role in your career. On the whole this will be a very small role; nothing is more clear from a study of the lives of men in medicine than the fact that they are able to surmount difficulties and ill fortune if they try hard enough. Second, the level of your ability is a factor, but after the series of selective process, after the series of filtrations that have left you as a kind of precipitate on the steps of the Medical School,

it is fair to assume that there is a high level of ability among you.

Perhaps the greatest variation in your original equipment and, in my opinion, the most potent source of variation in your careers will be the qualities of your characters: your stamina, your fortitude, your courage, your capacity for sustained effort, your generosity, your acceptance of responsibility, your intellectual honesty. These are the factors more than ability and much more than environment that make for competence, accomplishment, and integrity. Perhaps Deans should never give advice. I advise each of you to look at his own character and to take it into consideration in planning his future educational program. One of the things that biologists know is that growth can take place, and one of the things that physicians know is that character can sometimes be changed if the necessity for change is recognized.

Finally, I want to tell you again that your colleagues on the Faculty and teaching staff have a permanent interest in your careers. This is partly because they are responsible for having selected you. It is partly because they are responsible for the organization of the medical education which you have had and know that your success is in some degree a test of their own adequacy in planning that educational program. They are also interested in your careers because they are interested in you yourselves. I know that every member of the Faculty will join me in wishing you the durable satisfactions that medicine offers to those who earn them.

# The Stethoscope



The summer has gone quickly. On returning in the fall, users of the Library saw on its walls two new portraits—one of Dr. George R. Minot painted by Charles Hopkinson and one of Dr. Harvey Cushing painted by William James. They add distinction and interest to the reading room. The first year class includes eight women, eighty veterans and twenty doctor's sons. As usual they come from all over the world and from many colleges and universities. There are four nineteen year olders and two who are twenty-nine, the average age being twenty-two and a half. Seventy-eight of the members have college degrees and all but one have had three or more years of college experience. They are a nice looking class and very earnest. On registration day they were introduced to the School by a clinic. Dean Burwell met them in the amphitheatre of the Peter Bent Brigham Hospital and presented them to Mr. Edwin Lord. The Dean explained to them the mysteries of chronic adhesive pericarditis, demonstrated the taking of venous pressure, and showed by his friendship and respect for Mr. Lord that, as Francis Peabody said, the secret of the care of the patient is in caring for him.—Dr. James H. Means addressed

the class a few evenings later in Vanderbilt Hall under the auspices of the Phillips Brooks House Association. He reminded the group of their responsibility to do well. In his day, he said, it was a simple matter to enter the School; all one had to do was to present some sort of a certificate at the Dean's Office and start work. Now each student is selected with meticulous precision from a vast number; for each one selected there were fifteen others for whom no place could be found.—In the course of a year, a great many professional openings for all types of medical work are offered to graduates of the School. The difficulty is to fill them; neither in the Alumni Office nor in the Dean's Office does any person know of candidates who might be available for the new and exciting adventures calling to be pursued. Would it be worth while for the Alumni Association to establish some sort of a medical placement bureau?—Dean Burwell will retire in February. He is fifteenth Dean of the School. Dr. Walter Channing (1826-1847) still holds the record for length of service in this chair. Dr. Edsall (1918-1935) is in second place. Dr. Burwell (1935-1949) finds himself tied for third place with such distinguished colleagues as Dr. Calvin Ellis (1869-1883) and Dr. William L. Richardson (1893-1907).—President Conant said that while Dr. Burwell was Dean, the School held its position in medical education and made major contributions to the nation's war effort as well as to peacetime medicine.—As a final contribution Dean Burwell has led in initiating a scheme of general reorganization embracing not only the School but also its relation with its allied hospitals. The School will always be grateful for his devotion.

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the Council for the ensuing three years." After some discussion the motion was voted on and unanimously passed.

The President then introduced Dean Burwell who spoke about the finances of the School. He pointed out that the great increase in expenses have necessitated an increase in tuition from \$650 to \$800 and a cut in departmental budgets of  $8\frac{1}{2}\%$ . In addition a study of the correlation of school and hospital budgets is underway in order that duplications of expenses in teaching and research may be avoided. There has also been an academic reorganization which principally distinguishes between the full and part time teaching staff. The Dean pointed out that alumni could be helpful with advice and also financial assistance.

Walter Bauer was next introduced. He spoke on the need of experimentation in medical education. In his opinion we are in a rut in terms of pedagogy. He suggested that the problems of the practice of medicine and the problems of the patient be taught in the first year. In the second year the subjects of personality and environmental variation should be taught with physical diagnosis. He advocated that the third year be spent as clinical clerks and the fourth year in the O.P.D.

Francis Moore concluded the formal addresses by telling of the current trend in surgical research in which physiological alterations are introduced rather than the removal of pathology e.g. vagotomy, lobotomy, sympathectomy, etc., and also about research employing isotopes.

John Fallon of Worcester spoke from the floor pleading for more fun at reunions. He suggested that one big reunion for the entire alumni body every five years might well replace the individual class reunions.

President Gildea closed the meeting with a plea for a broader understanding in medical education. He asked that stereotyped education be avoided and that special individual training be given each student.

## ANNUAL MEETING

The Annual Meeting of the Harvard Medical Alumni Association was held at the University Club in Chicago on the twenty-third of June.

It was an exceedingly hot and muggy evening and little formality was preserved by the 150 alumni who met at the cocktail hour. Following dinner the meeting was called to order by President Gildea. The Secretary's and Treasurer's reports were quickly disposed of, and Kenneth E. Appel of Haverford, Pa. was unanimously elected President for 1948-1949. Announcement was then made of the election of Tracy J. Putnam, Richard B. Capps and William T. Salter to the Council. The Secretary then moved that the seventh paragraph of Article I of the By-Laws be amended to read—"The nominee residing in New England who receives the highest number of votes (to the Council), the nominee residing outside of New England receiving the highest number of votes and the nominee irrespective of where he lives who receives the highest number of votes to either of the first two shall be elected members of







